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UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MISSOURI
EASTERN DIVISION

U. S. DISTRICT COURT
EASTERN DISTRICT OF MO
ST. LOUIS
United States of America,

Plaintiff,

v.

Mussein Khalaf,

Defendant(s).

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Civil Case No. 4:22-CR-00062 HEA

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS
(Short Form)

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

In support of this application, I answer the following questions under penalty of perjury:

1. If incarcerated. I am being held at: _____

If employed there, or have an account in the institution, I have attached to this document a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

2. If not incarcerated. If I am employed, my employer's name and address are:

Not employed, 2408 Laclede Station Rd, Apt 3, Maplewood, MO 63143.

My gross pay or wages are: \$ 0.00, and my take-home pay or wages are: \$ 0.00 per
(specify pay period) _____

3. Other Income. In the past 12 months, I have received income from the following sources (check all that apply):

- | | | |
|--|---------|--|
| (a) Business, profession, or other self-employment | ___ Yes | <input checked="" type="checkbox"/> No |
| (b) Rent payments, interest, or dividends | ___ Yes | <input checked="" type="checkbox"/> No |
| (c) Pension, annuity, or life insurance payments | ___ Yes | <input checked="" type="checkbox"/> No |
| (d) Disability or worker's compensation payments | ___ Yes | <input checked="" type="checkbox"/> No |
| (e) Gifts or inheritances | ___ Yes | <input checked="" type="checkbox"/> No |
| (f) Any other sources | ___ Yes | <input checked="" type="checkbox"/> No |

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

4. Amount of money that I have in cash or in a checking or savings account: \$ 900.

5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value that I own, including any item of value held in someone else's name (describe the property and its approximate value):

None.

6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses (describe and provide the amount of the monthly expense):

Transportation (About \$100 monthly).
Food (about \$200 monthly).
Phone plan (\$20 Monthly).
health insurance (\$50 monthly).

7. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:

None.

8. Any debts or financial obligations (describe the amounts owed and to whom they are payable):

Credit card debt (About \$4000).

Declaration: I declare under penalty of perjury that the above information is true and understand that a false statement may result in a dismissal of my claims.

Hussein

Applicant's Signature

Hussein Khalf

Printed Name

12/22/2022

Date